

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088269	2 Total pages filed: 34	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Morgan L.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/06/2024
	NICKNAME	LAST Kirkpatrick	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4417 77th Street Lubbock, TX 79424		Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Deitra A.	MI	
	NICKNAME Dede	LAST Kirkpatrick	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4417 77th Street Lubbock, TX 79424			
7 CAMPAIGN TREASURER PHONE	AREA CODE (806)	PHONE NUMBER 790-3348	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2024	THROUGH		Month Day Year 09/26/2024
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) State Board Of Education District 15	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Kirkpatrick, Morgan L. (Ms.) **14 Filer ID** (Ethics Commission Filers)
00088269

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input checked="" type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		Blue Horizon Texas PAC
		COMMITTEE ADDRESS
		PO Box 780162
		San Antonio, TX 78278
		COMMITTEE CAMPAIGN TREASURER NAME
		Barnett, Claire
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		TX

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,620.41
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	3,770.41
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	4,787.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Morgan L. Kirkpatrick

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Kirkpatrick, Morgan L. (Ms.)		19 Filer ID 00088269	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT	
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	7,064.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	556.41
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	3,770.41
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Gretchen	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Albuquerque, NM 87123		
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) Unemployed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angstadt, Virginia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79424		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbre , Stephanie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Wolfforth, TX 79382		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrick, Sue	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blankenship, Kyra	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Lubbock, TX 79401		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckle, Cyndie <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79416	7 Amount of Contribution (\$) <div style="text-align: right;">\$30.00</div>
8 Principal occupation / Job title (See Instructions) Lecturer		9 Employer (See Instructions) Texas Tech University
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Earlene <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) <div style="text-align: right;">\$50.00</div>
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Jenny <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Event staff		Employer (See Instructions) KT Black
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Jenny <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Event staff		Employer (See Instructions) KT Black
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Jenny <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Event staff		Employer (See Instructions) KT Black

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bri	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Lago Vista, TX 78645	
8 Principal occupation / Job title (See Instructions) Candidate Services		9 Employer (See Instructions) Texas Democratic Services
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bri	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Lago Vista, TX 78645	
Principal occupation / Job title (See Instructions) Candidate Services		Employer (See Instructions) Texas Democratic Party
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Shirley	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Lubbock, TX 79403	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Kristy	Amount of Contribution (\$) \$14.00
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conatser, Charles	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lubbock, TX 79411	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/15 Rpt: 7/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drury, Katherine	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79413		
8 Principal occupation / Job title (See Instructions) Account Executive		9 Employer (See Instructions) Communique
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drury, Katherine	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Account Executive		Employer (See Instructions) Communique
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunham, Charlotte	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunham, Charlotte	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunham, Charlotte	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gambles, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Owner/CEO Gant-Man Development LLC		9 Employer (See Instructions) Self
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Manuel A. <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giemza, Kristi <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Lubbock Health Department
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Kimberleigh <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Varian Medical Systems
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodloe, Elaine <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) Convergys

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodloe, Elaine	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79414		
8 Principal occupation / Job title (See Instructions) Customer Service		9 Employer (See Instructions) Convergys
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Constance	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Constance	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Constance	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Martin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79424		
Principal occupation / Job title (See Instructions) Parts salesman		Employer (See Instructions) Gene Messer Ford

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grayson, Laura Diann <hr/> 6 Contributor address; City; State; Zip Code Idalou, TX 79329	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Laurie <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Laura Dianne <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) unemployed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Laura Dianne <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Laura Dianne <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/15 Rpt: 11/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton Hotel	7 Amount of Contribution (\$) \$245.00
6 Contributor address; City; State; Zip Code Memphis, TN 38117		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoard, Teresa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Amarillo, TX 79124		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Karen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79403		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopson, Nellie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Slaton, TX 79364		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohout, Sharon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Lubbock, TX 79423		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/15 Rpt: 12/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohout, Sharon	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79423		
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohout, Sharon	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Lubbock, TX 79423-1213		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisenby, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Teacher/Military		Employer (See Instructions) Castleberry ISD/TXARNG
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisenby, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Teacher/Military		Employer (See Instructions) Castleberry ISD/TXARNG
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Bethany	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79423		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/15 Rpt: 13/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maccarone, Thomas	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79410	
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Texas Tech University
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Connie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-employed
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Connie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-employed
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriearty, Tammy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Lubbock, TX 79423	
Principal occupation / Job title (See Instructions) Public Health Specialist		Employer (See Instructions) Texas Dept of State Health Services
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Luciano	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Brandy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79412		
8 Principal occupation / Job title (See Instructions) Administrative Assistant		9 Employer (See Instructions) Tyler Technologies
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pirtle, Adam	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Legal Aid of Northwest Texas
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Sarah	Amount of Contribution (\$) \$225.00
Contributor address; City; State; Zip Code Wolfforth, TX 79382		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaberg, Karmyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Amarillo, TX 79109		
Principal occupation / Job title (See Instructions) Registered nurse		Employer (See Instructions) Retired
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaberg, Karmyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Amarillo, TX 79109		
Principal occupation / Job title (See Instructions) Registered nurse		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/15 Rpt: 15/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaberg, Karmyn	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Amarillo, TX 79109		
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) Retired
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaberg, Laina	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Amarillo, TX 79109		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Beth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Gateways Counseling PC
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Debbie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stephanie	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/15 Rpt: 16/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Gentry, Lola	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79404		
8 Principal occupation / Job title (See Instructions) Paralegal		9 Employer (See Instructions) Stephen T Krier
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swingen, Abigail	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tawney, Jakob	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78705		
Principal occupation / Job title (See Instructions) Public Policy Fellow		Employer (See Instructions) Texas AFT
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tawney, Jakob	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78705		
Principal occupation / Job title (See Instructions) Public Policy Fellow		Employer (See Instructions) Texas AFT
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas AFL-CIO	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78711		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/15 Rpt: 17/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Women <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Women of the BV <hr/> Contributor address; City; State; Zip Code Bryan, TX 77805	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tipton, Keith <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79414	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Frances <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Allison <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Tech University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/34
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Allison <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Texas Tech University
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wigglesworth, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Self-employed
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jamie <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PM		Employer (See Instructions) Optomi
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zubia Rae, Diana <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Corrections
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zubie Rae, Diana <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 19/34	
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/20/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blue Horizon Texas PAC	8 Amount of contribution (\$) \$100.00	9 In-kind contribution description Strategy session, endorsement, social media, email promotion
	7 Contributor address; City; State; Zip Code San Antonio, TX 78278	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blue Horizon Texas PAC	Amount of contribution (\$) \$150.00	In-kind contribution description Field consulting
	Contributor address; City; State; Zip Code San Antonio, TX 78278	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Juliann	Amount of contribution (\$) \$40.00	In-kind contribution description snacks for meet and greet
	Contributor address; City; State; Zip Code Bushland, TX 79012	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) social worker/Case Manager		Employer (FOR NON-JUDICIAL) (See instructions) BSA Hospital	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/3 Rpt: 20/34	
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Gracie	8 Amount of contribution (\$) \$50.00	9 In-kind contribution description snacks for meet and greet
	7 Contributor address; City; State; Zip Code Lubbock, TX 79415	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Sr. Legal Assistant		11 Employer (FOR NON-JUDICIAL) (See instructions) Kyra K Blankenship	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Constance	Amount of contribution (\$) \$20.00	In-kind contribution description snacks for meet and greet
	Contributor address; City; State; Zip Code Lubbock, TX 79410	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Unemployed		Employer (FOR NON-JUDICIAL) (See instructions) Unemployed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korn, Martha	Amount of contribution (\$) \$20.00	In-kind contribution description snacks for meet and greet
	Contributor address; City; State; Zip Code Lubbock, TX 79413	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Unemployed		Employer (FOR NON-JUDICIAL) (See instructions) Unemployed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 21/34	
2 FILER NAME Kirkpatrick, Morgan L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088269	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Cheryl	8 Amount of contribution (\$) \$50.00	9 In-kind contribution description snacks for meet and greet
	7 Contributor address; City; State; Zip Code Lubbock, TX 79424	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Sarah	Amount of contribution (\$) \$50.00	In-kind contribution description snacks for meet and greet
	Contributor address; City; State; Zip Code Wolfforth, TX 79382	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Unemployed		Employer (FOR NON-JUDICIAL) (See instructions) Unemployed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaberg, Karmyn	Amount of contribution (\$) \$76.41	In-kind contribution description snacks for meet and greet
	Contributor address; City; State; Zip Code Amarillo, TX 79109	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Registered Nurse		Employer (FOR NON-JUDICIAL) (See instructions) Retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 1/13 Rpt: 22/34	2	FILER NAME Kirkpatrick, Morgan L. (Ms.)	3	Filer ID (Ethics Commission Filers) 00088269
4	Date 09/24/2024	5	Payee name ALON DK #51507		
6	Amount (\$) \$19.49	7	Payee address; City; State; Zip Code 401 Birdwell Ln Big Spring, TX 79720		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas for Howard County Dem visit		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 09/22/2024		Payee name ActBlue Technical Services		
	Amount (\$) \$118.81		Payee address; City; State; Zip Code 366 Summer Street Somerville, ME 02144-3132		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees for processing political contributions July 1-Sept. 15, 2024		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 08/04/2024		Payee name ActBlue		
	Amount (\$) \$200.00		Payee address; City; State; Zip Code 366 Summer Street Somerville, ME 02144-3132		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Two tickets to Democracy in Action Dinner with Potter County Democratic Party for myself & staffer		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 23/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
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4 Date 08/24/2024	5 Payee name ActBlue
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6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, ME 02144-3132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taylor County Democratic Party - ticket for picnic
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/01/2024	Payee name Alon #51413
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Amount (\$) \$22.82	Payee address; City; State; Zip Code 4324 82nd St Lubbock, TX 79423
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Wichita Falls event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/26/2024	Payee name Berea Printing Comppany
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Amount (\$) \$225.00	Payee address; City; State; Zip Code 1060 W. Bagley Road Suite 102 Berea, OH 44017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2,000 push cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 24/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
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4 Date 09/09/2024	5 Payee name Berea Printing Company
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6 Amount (\$) \$382.59	7 Payee address; City; State; Zip Code 1060 W. Bagley Road Suite 102 Berea, OH 44017
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 5,000 push cards
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/03/2024	Payee name Berea Printing Company
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Amount (\$) \$225.16	Payee address; City; State; Zip Code 1060 W. Bagley Road Suite 102 Berea, OH 44017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2,000 postcards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/26/2024	Payee name Berea Printing Company
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Amount (\$) \$372.82	Payee address; City; State; Zip Code 1060 W. Bagley Road Suite 102 Berea, OH 44017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 5,000 postcards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 25/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/22/2024	5 Payee name Canva	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 3212 E. Cesar Chavez Street Building 1, Suite 1300 Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/22/2024	Payee name Canva	
Amount (\$) \$12.99	Payee address; City; State; Zip Code 3212 E. Cesar Chavez Street Building 1, Suite 1300 Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2024	Payee name Canva	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 3212 E. Cesar Chavez Street Building 1, Suite 1300 Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website design
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/13 Rpt: 26/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/10/2024	5 Payee name Etsy - PicoProjedcts (Lee Ware)	
6 Amount (\$) \$108.25	7 Payee address; City; State; Zip Code 17 Adams St Brooklyn, NY 11201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign buttons
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2024	Payee name Etsy - PicoProjedcts (Lee Ware)	
Amount (\$) \$108.25	Payee address; City; State; Zip Code 17 Adams St Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign buttons
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2024	Payee name Kamay Y Convenience Store	
Amount (\$) \$21.92	Payee address; City; State; Zip Code 8682 Seymour Hwy. Wichita Falls, TX 76310	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Wichita Falls Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/13 Rpt: 27/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/04/2024	5 Payee name Lubbock NAACP	
6 Amount (\$) \$64.35	7 Payee address; City; State; Zip Code P. O. Box 1903 Lubbock, TX 79408	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Scholarship Banquet ticket
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/17/2024	Payee name Lubbock NAACP	
Amount (\$) \$80.00	Payee address; City; State; Zip Code P. O. Box 1903 Lubbock, TX 79408	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Scholarship Banquet ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2024	Payee name Mailchimp	
Amount (\$) \$106.60	Payee address; City; State; Zip Code 405 N. Angier Ave.NE Atlanta, GA 30312	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service to update supporters and solicit donations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/13 Rpt: 28/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
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4 Date 08/03/2024	5 Payee name Mailchimp
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6 Amount (\$) \$106.60	7 Payee address; City; State; Zip Code 405 N. Angier Ave.NE Atlanta, GA 30312
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email service to update supporters and solicit donations
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/03/2024	Payee name Mailchimp
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Amount (\$) \$106.60	Payee address; City; State; Zip Code 405 N. Angier Ave.NE Atlanta, GA 30312
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) emails/voter contact	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense emails/voter contact
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/17/2024	Payee name Meta Platforms, INC
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Amount (\$) \$35.00	Payee address; City; State; Zip Code 1 Meta Way Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 29/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/25/2024	5 Payee name Murphy Express 8985	
6 Amount (\$) \$19.00	7 Payee address; City; State; Zip Code 5113 92nd Street Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Abilene picnic
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2024	Payee name Office Depot	
Amount (\$) \$38.97	Payee address; City; State; Zip Code 6805 Slide Road Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV/Volunteer handouts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2024	Payee name Office Depot	
Amount (\$) \$9.55	Payee address; City; State; Zip Code 6805 Slide Road Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Address lists for postcards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 30/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/13/2024	5 Payee name PalPal - Screen Shots	
6 Amount (\$) \$236.00	7 Payee address; City; State; Zip Code 5616 Avenue B Lubbock, TX 79404	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign t-shirts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2024	Payee name PayPal - Screen Shots	
Amount (\$) \$206.00	Payee address; City; State; Zip Code 5616 Avenue B Lubbock, TX 79404	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign t-shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2024	Payee name PayPal - Screen Shots	
Amount (\$) \$152.00	Payee address; City; State; Zip Code 5616 Avenue B Lubbock, TX 79404	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign t-shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 31/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 09/09/2024	5 Payee name Reach Progress PBC	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 228 Park Avenue S PMB 62932 New York, NY 10003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign texting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2024	Payee name Sam's Club	
Amount (\$) \$73.06	Payee address; City; State; Zip Code 6016 Marsha Sharp Freeway Lubbock, TX 79407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense candy for tabling/voter registration
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2024	Payee name Sam's Club	
Amount (\$) \$110.17	Payee address; City; State; Zip Code 6016 Marsha Sharp Freeway Lubbock, TX 79407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Snacks for town hall
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt: 32/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
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4 Date 08/25/2024	5 Payee name Stripes 5047 (Phillips 66 SEI Fuels)
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6 Amount (\$) \$33.56	7 Payee address; City; State; Zip Code 115 South Broadway Street Post, TX 79356
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Abilene picnic
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/11/2024	Payee name TTU Student Engagement
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Amount (\$) \$50.00	Payee address; City; State; Zip Code P. O. Box 45020 Lubbock, TX 79409
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hub City Fest - Voter registration booth
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name USPS Singer
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Amount (\$) \$122.40	Payee address; City; State; Zip Code 4901 S Loop 289 Lubbock, TX 79464
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense stamps for postcards and box to mail
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 33/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/31/2024	5 Payee name United Express 502	
6 Amount (\$) \$27.69	7 Payee address; City; State; Zip Code 3405 50th Lubbock, TX 79413	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Amarillo trip
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2024	Payee name United Express 552	
Amount (\$) \$21.47	Payee address; City; State; Zip Code 6321 4th Street Lubbock, TX 79416	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for trip to Amarillo
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2024	Payee name Walmart	
Amount (\$) \$26.22	Payee address; City; State; Zip Code 4215 S. Loop 289 Lubbock, TX 79423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for candidate event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 Rpt: 34/34	2 FILER NAME Kirkpatrick, Morgan L. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088269
4 Date 08/08/2024	5 Payee name Woodshed Gifts	
6 Amount (\$) \$12.99	7 Payee address; City; State; Zip Code 6405 Indiana Avenue Lubbock, TX 79413	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name tags
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/26/2024	Payee name Zoom	
Amount (\$) \$17.04	Payee address; City; State; Zip Code 55 Lmaden Blvd. San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Candidate zoom meetings	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate zoom meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name Zoom	
Amount (\$) \$17.04	Payee address; City; State; Zip Code 55 Lmaden Blvd. San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Candidate zoom meetings	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate zoom meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held